## Iowa Department of Natural Resources

## Private Water Well Rehabilitation Record

Name:	City:		State:	
Address:	Zip:	Phone:		
2. Well Location:				
1/4 of,1/4 of,1/4 o	f, Section , Twp	. N, Range	West	/East(circle one
Cou	· <del></del>			
3. Description:				
Well depth: ft.	Casing material: stee		te, clay, b	rick, stone
Depth to water: ft.		( circle one)		,
Casing diameter: in.	Type of construction:		bored, dug,	augered
Yr. or decade constrd.: ft.	Briefly describe the w	( circle one )		
Depth of casing.	Drietly describe the w	OIR GOIR.		
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County Agent before any w	d as defined by rule	567- 47.5 "Well	Sealing" o	f the Iowa
Well Rehabilitation done u County Agent before any w This well has been rehabilitate Administrative Code (IAC) with Signature of County Agent:	d as defined by rule the oversight and assista	567- 47.5 "Well	Sealing" o	f the Iowa
County Agent before any war.  This well has been rehabilitated Administrative Code (IAC) with	d as defined by rule the oversight and assista	567- 47.5 "Well	Sealing" o	f the Iowa
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County Agent before any was This well has been rehabilitated Administrative Code (IAC) with Signature of County Agent:  I have rehabilitated this well Administrative Code (IAC). Signature of Contractor: Or well Owner:  Complete one form for each well David L. Kohlhaase	d as defined by rule the oversight and assistate as defined by rule 5 and submit within 30 d	567- 47.5 "Well Date A  Cert. N  Date Rehabilit	Sealing" of ated county approved: Sealing" of one control in the county agent: unty agent: ds paid by	f the Iowa agent.  f the Iowa